								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective January 1, 2003								10611647					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN		
TOTAL CLAIMS			19				RA	RATE FEE		1	RATE	FEE	
FOR			NUMBER FILED		NUM	BER EXTRA	BASI	BASIC FEE 375.0		ОЯ	Basic Fee	750.00	
TC	TAL CHARGE	19 minus 20=		•	ø	X\$	X\$ 9=		OR	X\$18=			
INE	EPENDENT C	6 minus 3 =		•	3	X4	X42=		OR	X84=	252.50		
ML	LTIPLE DEPE	NDENT CLAIM P	RESENT				+140=			OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2							TO	TOTAL		OR	TOTAL	1002.00	
7/25/05 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SM	ALL	ENTITY	OR	OTHER SMALL	THAN	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUMS PREVIO PAID F		PRESENT	RA	RATE TIONAL FEE			RATE	ADDI- TIONAL FÆE	
	Total	- 19	Minus	- 0	20_	-	X\$	9=		OR	X\$18=		
	Independent + ()		Minus	DENDENT	0	-/	X4:	2=		OR	X84=		
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OCF 1 100						+14	0=		OR	+260=		
+	\mathcal{A}^{\bullet}	-					ADDIT.	TAL		OR	TOTAL ADDIT, FEE		
	5/50 / D	(Column 1)		(Colum	nn_2)	(Column 3)	AD011.	rcc		•	ADDII. FEEI		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		PAID	BER DUSLY FOR	PRESENT EXTRA	RAT	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	1. 19	Minus	0	0	-0	X\$	9=		OR	X\$18=		
	Independent FIRST PRESE	NTATION OF MI	Minus JITIPLE DE	PENDENT	CLAIM	1-/0	X42	2s		OR	X84=		
					V		+14	0=		OR	+280=		
							ADDIT.	TAL FEE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)										•			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER	PRESENT EXTRA	RAŢ	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		-	X\$ 9	=		OR	X\$18=		
	Independent	•	Minus	***	A.	<u>-</u>	X42			OR	X84=		
	FINST PRESE	IRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	TOTAL		
	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number tound in the appropriate box										ADDIT. FEE		
		-ver rieviously P2	eron from c	. имерелов	and its face	reducer unimper	ionio ei a	w api	MONTHE DOX	#1 COI	umn 1.		